Yoga Classes in Morarji Desai National Institute of Yoga

1875. SHRI HARENDRA SINGH MALIK: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether free Yoga classes offered to general public in Morarji Desai National Institute of Yoga, New Delhi have been closed down indefinitely from 4th June, 2004 without making any alternative arrangement for hundreds of Yoga sadhakas who used to visit the institute daily for practicing yoga;

(b) whether sadhakas have been agitating against above decision for the last one month and Government have received a number of representations in this regard, and

(c) if so, the details thereof and the alternative arrangements made for resumption of classes for benefit of sadhakas who are facing several health related problems due to discontinuation of Yoga practice?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) All Yoga classes have been suspended at the Morarji Desai National Institute of Yoga (MDNIY), New Delhi as the class rooms are under re-construction. Alternative arrangements could not be made because of non-availability of suitable space to hold yoga classes for the general public.

(b) and (c) The Government have received a representation against suspension of yoga classes for the general public. The representationists have also called for resumption of classes. As the work is going on in full swing and there is no suitable space available in the proximity, it is not possible to resume yoga classes till the MDNIY building complex is completed.

Negative Publicity of Spurious Drugs

1876. SHRI ABANI ROY:
SHRIMATI PREMA CARIAPPA:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the total number of samples of drugs that have been lifted by drug inspectors during the last three years all over the country, year-wise;

(b) the details of percentage of samples declared spurious and the names of persons/Licensed companies manufacturing these drugs; and

(c) the steps taken by Government to stop the negative publicity of spurious drugs?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI). (a) and (b) As per feed back available from Drugs Control Administrations of States UTs, 38834, 36314 & 40862 drug samples were tested during 2001-02, 2002-03 and 2003-04, out of which 96,125 and 118 samples respectively were found spurious which is 0 25, 0 34 and 0 29 percent of the total samples tested.

Under the Drugs and Cosmetics Act, 1940 and rules thereunder, the responsibility for regulating manufacture and sale of drugs including taking administrative and legal action against the manufacturers tests with the State Governments. Based on the gravity of the offences detected, necessary punitive action under the said Act and rules is taken against the manufacturers for such categories of drugs by the concerned Drugs Controllers. In view of this, specific details of the spurious drugs detected etc. together with their identified manufacturers are not maintained centrally

(c) In view of the media reports quoting varying figures about the extent of circulation of spurious drugs in the country, the Government took a serious note of such reports and constituted an expert committee under the chairmanship of Dr. R A Mashelkar in January, 2003 to undertake a comprehensive examination of drug regulatory issues including spurious drugs in the country. Based on the recommendations of Dr R.A Mashelkar Committee, a legislation to amend the penal provisions of Drugs and Cosmetics Act, 1940 and to provide for stricter penalties to the offenders including a maximum penalty of capital punishment was introduced in the Parliament in December, 2003 The said legislation lapsed with the dissolution of the Parliament The steps to introduce the said legislation again have been initiated The salient amendments proposed under the Bill are given below—

(1) Enhancement punishments relating to spurious or adulterated drugs leading to death or grievous hurt within the meaning of Section 320 IPC upto punishment of death or imprisonment for a term which

shall not be less than 10 years but which may extend to imprisonment for life and shall also be liable to fine or one lakh rupees or upto 3 times the value of the goods seized, whichever is higher.

(2) Penalties for subsequent offences to be enhanced upto 10 years and with fine which shall not be less than one lakh rupees.

(3) Offences relating to spurious or adulterated drugs to be made non-bailable and cognizable.

(4) Provision for setting up of special courts to try offences of spurious or adulterated drugs.

(5) To confer powers upon police officers not below the rank of sub-inspector or other designated officer to institute prosecutions under the said Act

The proposed amendments will make the law deterrent to the offenders involved in the manufacture or sale of spurious drugs The involvement of enforcing agencies like police will help in speedy investigations to look the culprits and in controlling anti-social elements involved in such activities.

Flourosis Disease in Andhra Pradesh

1877. SHRI SUDARSHAN AKARAPU Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware that several districts particularly Nalgonda district in A.P are plagued by "Flourosis" disease;

(b) if so, the steps Government have taken to contain the disease,

(c) whether any financial assistance has been rendered to the State Government to help tackle the disease; and

(d) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI). (a) to (d) According to ICMR that 16 districts out of 23 districts in the State of Andhra Pradesh including Nalgonda district are endemic with Fluorosis The Government of Andhra Pradesh has reported that 397 villages of Nalgonda district are affected by Fluorosis (Medical camps are carried